

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 2018

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To _____

(Payee)

PAID BY

Encl. # 6 to
SAPC 23666
COPY 1 OF 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				4,527.92	

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total 4,527.92

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

STATINTL

Date 1/14/58 *Payee

(Signature or initials)

Per

Title

Amount verified; correct for
(Signature or initials)

Contract No. A-101

Date

Req. No.

Date

Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

†

(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title

Title _____

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____
Cash, \$ _____, on _____, 19____ Payee _____
(on Treasurer of the United States in favor of payee named above.)

(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he is acting, must be stated. If the person is "John Doe Company," the name of the company must be stated, as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title

Public Voucher for Purchases and
Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. COST REIMBURSABLE

Sheet No. 1 of Bureau Voucher No. 2018

(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract <u>A-101</u> System IV					
		Direct Costs Properly Chargeable to Contract <u>A-101</u> for the Month of December, 1957					
		STATINTL					
		Research & Development					
				<u>Production</u>			<u>Total</u>
		Labor for the period 12/30 thru 12/31/57 JV 127060					
		STATINTL					
		Other Costs - JV 127040 JV 127060 JV 127065					
		Total Labor and Other Costs					
		G & A expense computed at interim rate of					
		Total Costs				\$ 4,527.92	